

## INTERNET MARINE SERVICES ORDERING (IMOS) APPLICATION FORM

### I HOW TO FILL UP THIS FORM

1. Fill in this form in BLOCK LETTERS
2. Submit your completed form and a **copy of the Business Profile of your company** from the Accounting and Corporate Regulatory Authority (ACRA) to: **Manager (Control Centre)**  
 Marine Services  
 70 West Coast Ferry Road  
 Singapore 126800  
 Fax to (65) **6379 9812 / 9813**
3. A contract (Terms & conditions of Internet Marine Services Ordering) will be delivered to you on receipt of this application. It must be signed and endorsed within 2 weeks of receipt for the account to be commissioned.
4. For queries on Internet Marine Services Ordering, please e-mail to [imosystem@psa.com.sg](mailto:imosystem@psa.com.sg).

### II ADDITIONAL INFORMATION

1. To open a PSA account, please visit <http://pn2.portnet.com/WebPublic/index.html>, click "Register" and proceed from thereon. Should you encounter any problem, please contact Helpdesk 6321 1173 for their guidance.

### III COMPANY PARTICULARS

<b>Company Name:</b>	
<b>Address:</b>	
<b>UEN Number:</b>	
<b>Company Tel:</b>	
<b>Company Fax:</b>	
<b>Company Email:</b>	
<b>PSA Marine Account No:</b>	
<b>Description of Business:</b>	
<b>Is your company currently a PORTNET® Subscriber? Yes / No</b>	

**IV DATA SECURITY ADMINISTRATORS NOMINATION**

Please assign TWO Data Security administrators (DSAs) whose designation must be of supervisory status. The DSAs will be the main contact persons for Internet Marine Ordering Services and will be the authorised party to request for the creation and deletion of user logon ids for your company for the Internet Marine Services Ordering System.

	DSA # 1	DSA #2
<b>Name (<u>Underline Surname</u>):</b>		
<b>NRIC:</b>		
<b>Designation:</b>		
<b>Office Tel:</b>		
<b>Mobile:</b>		
<b>Email:</b>		
<b>Fax:</b>		
<b>Specimen Signature:</b>		

**IMPORTANT:** IN THE EVENT ANY PERSONNEL NAMED IN THIS APPLICATION LEAVES THE COMPANY, THE COMPANY MUST INFORM INTERNET MARINE SERVICES ORDERING IMMEDIATELY AND MUST PROVIDE INTERNET MARINE SERVICES ORDERING WITH THE PARTICULARS OF THE REPLACEMENT PERSONNEL.

**VI SUBMITTED BY:**

<b>Name (underline surname):</b>	
<b>NRIC:</b>	<b>Designation:</b>
<b>Office Tel No:</b>	<b>Email:</b>
<b>Mobile No:</b>	<b>Fax No:</b>
<b>Company Name:</b>	
<b>Signature:</b>	<b>Date:</b>
<b>Company Stamp:</b>	

**VI FOR INTERNAL USE:**

	<b>CHECK</b>	<b>Name &amp; signature</b>
<b>Letter of acceptance:</b>	[ ]	
<b>Org Code :</b>	[ ]	
<b>CUSID:</b>	[ ]	
<b>Finance: if applicable</b>	[ ]	
<b>Confirmation of MOS Account:</b>	[ ]	
<b>Log on Id letter :</b>	[ ]	